APPLICATION DATA SHEET

Application Information

Secrecy Order in Parent Appl.::

Application Number::	
Filing Date::	November 25, 2003
Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	
Number of CD Disks::	
Number of Copies of CDs::	
Sequence Submission?::	
Computer Readable Form (CFR)?::	
Number of Copies of CFR::	
Title::	USER AUTHENTICATION THROUGH SEPARATE
	COMMUNICATION LINKS
Attorney Docket Number::	42339-191615
Request for Early Publication?::	N
Request for Non-Publication?::	N
Suggested Drawing Figure::	
Total Drawing Sheets::	2
Small Entity?::	N
Latin Name::	
Variety Denomination Name::	
Petition Included?::	
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	

Applicant Information

Applicant Authority Type::

Inventor

Primary Citizenship::

US

Country::

USA

Status::

Full Capacity

Given Name::

Robert

Middle Name::

C.

Family Name::

Knauerhase

Name Suffix::

City of Residence::

Portland

State or Province of Residence::

OR

Country of Residence::

USA

Street of Mailing Address::

4926 SW Corbert Ave., #108

City of Mailing Address::

Portland

State or Province of Mailing

Address::

Country of Mailing Address::

USA

OR

Postal or Zip Code of Mailing

Address::

97239-3921

Applicant Authority Type::

Inventor

Primary Citizenship::

US

Country::

USA

Status::

Full Capacity

Given Name::

Krystof

Middle Name::

C.

Family Name::

Zmudzinski

Name Suffix::

City of Residence::

Forest Grove

State or Province of Residence::

OR

Country of Residence::

USA

Street of Mailing Address::

1545 Main Street

City of Mailing Address::	Forest Grove
State or Province of Mailing Address::	OR
Country of Mailing Address::	USA
Postal or Zip Code of Mailing Address::	97116
Applicant Authority Type::	Inventor
Primary Citizenship::	US
Country::	USA
Status::	Full Capacity
Given Name::	Abhay
Middle Name::	Α.
Family Name::	Dharmadhikari
Name Suffix::	
City of Residence::	Beaverton
State or Province of Residence::	OR
State or Province of Residence:: Country of Residence::	OR USA
Country of Residence::	USA
Country of Residence:: Street of Mailing Address:: City of Mailing Address:: State or Province of Mailing	USA 15909 NW Emily Lane
Country of Residence:: Street of Mailing Address:: City of Mailing Address::	USA 15909 NW Emily Lane Beaverton
Country of Residence:: Street of Mailing Address:: City of Mailing Address:: State or Province of Mailing Address::	USA 15909 NW Emily Lane Beaverton OR
Country of Residence:: Street of Mailing Address:: City of Mailing Address:: State or Province of Mailing Address:: Country of Mailing Address:: Postal or Zip Code of Mailing	USA 15909 NW Emily Lane Beaverton OR USA
Country of Residence:: Street of Mailing Address:: City of Mailing Address:: State or Province of Mailing Address:: Country of Mailing Address:: Postal or Zip Code of Mailing Address::	USA 15909 NW Emily Lane Beaverton OR USA 97006
Country of Residence:: Street of Mailing Address:: City of Mailing Address:: State or Province of Mailing Address:: Country of Mailing Address:: Postal or Zip Code of Mailing Address:: Applicant Authority Type::	USA 15909 NW Emily Lane Beaverton OR USA 97006
Country of Residence:: Street of Mailing Address:: City of Mailing Address:: State or Province of Mailing Address:: Country of Mailing Address:: Postal or Zip Code of Mailing Address:: Applicant Authority Type:: Primary Citizenship::	USA 15909 NW Emily Lane Beaverton OR USA 97006

Middle Name::

Family Name::

Name Suffix::						
City of Residence::						
State or Province of	Residence::					
Country of Residence	e::					
Street of Mailing Add	dress::					
City of Mailing Addre	ess::					
State or Province of Address:: Country of Mailing A	_					
Postal or Zip Code of Address::	f Mailing					
Correspondence	Information	ı				
Correspondence Cu Number::	202-344 none Number::					
Phone Number::			202-344-4800			
Fax Number:: E-Mail Address::		202-344-8300				
		jakami	jakaminski@venable.com			
Representative Information						
Representative Cust Number::	tomer	26694				
Domestic Priority	Informatio	n				
Application::	Continuity	Туре::	Parent Application::	Parent Filing Date::		
	Continuation	on of				
	Continuation	on of				
	Cantinuctio	e				

Continuation of

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee Name:: Intel Corporation

Street of Mailing Address:: 2200 Mission College Blvd.

City of Mailing Address:: Santa Clara

State or Province of Mailing California

Address:: USA

Postal or Zip Code of Mailing 95052

Postal or Zip Code of Mailing 950
Address::